

**PATENT APPLICATION****DECLARATION AND POWER OF ATTORNEY****ATTORNEY DOCKET NO.16-579****MS DOCKET NO. 307517.01**

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Block-Level Sampling in Statistics Estimation

the specification of which is filed herewith unless the following box is checked:

( ) was filed on \_\_\_\_\_ as US Application Serial No. or PCT International Application

Number \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to patentability as defined in 37 CFR 1.56.

**Foreign Application(s) and/or Claim of Foreign Priority**

I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
			YES: _____ NO: _____
			YES: _____ NO: _____

**POWER OF ATTORNEY:**

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) associated with

Customer No. 27441

to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Send Correspondence to: Stephen J. Schultz

Direct Telephone Calls To: Stephen J. Schultz

Contact Name: Stephen J. Schultz

Contact Name : Stephen J. Schultz

Firm Name: Watts Hoffmann Co. LPA

Contact Phone Number: 216-241-6700

Firm Address: 1100 Superior Ave., Suite 1750

City, State and Zip: Cleveland, OH 44114

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**ATTORNEY DOCKET NO.:16-579**  
**307517.01**

**MS DOCKET NO.**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: Gautam Das

Citizenship: India

Residence: Redmond, WA 98053

Post Office Address: 2521 276th Court, NE, Redmond, WA 98053

Gautam Das  
Inventor's Signature

3/30/04  
Date

Full Name of Inventor: Surajit Chaudhuri

Citizenship: India

Residence: Redmond, WA 98052

Post Office Address: 14909 NE 75<sup>th</sup> Court, Redmond, WA 98052

Surajit Chaudhuri  
Inventor's Signature

3/30/04  
Date

Full Name of Inventor: Utkarsh H. Srivastava

Citizenship: India

Residence: Stanford, CA 94305

Post Office Address: 796 Escondido Rd, Apt 28 S, Stanford, CA 94305

Utkarsh H. Srivastava  
Inventor's Signature

3/30/04  
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## PATENT APPLICATION

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Schultz

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6700  
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Full Name of Inventor: Gautam DasCitizenship: IndiaResidence: Redmond, WA 98053Post Office Address: 2521 276th Court, NE, Redmond, WA 98053

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Inventor's Signature

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DateFull Name of Inventor: Surajit ChaudhuriCitizenship: IndiaResidence: Redmond, WA 98052Post Office Address: 14909 NE 75<sup>th</sup> Court, Redmond, WA 98052

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Inventor's Signature

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DateFull Name of Inventor: Utkarsh H. SrivastavaCitizenship: IndiaResidence: Stanford, CA 94305Post Office Address: 796 Escondido Rd, Apt 28 S, Stanford, CA 94305

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Utkarsh

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Inventor's Signature

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03/29/2004

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Date